08/24/06

Date

FEE TRANSMITTAL For FY 2005 METHOD OF PAYMENT (\$) 130.00 METHOD OF PAYMENT (\$) 130.00 METHOD OF PAYMENT (\$) 130.00 For Hold Command Poposit Account Number (\$) 22666 Poposit Account Popos	TO ANOMITTAL		Complete a Known			
Figure 1 September 30, 2003 Applicant daims small entity status. Seo 37 CFR 1.27. Examiner Name Paul W. Schlie	FEE IRANSMILLIAL	Application Number	10/6/6,882			
Applicant daims small entity situs. Sep 37 CFR 1.27. TOTAL AMOUNT OF PAYMENT (\$) 130,00 Art Unit 2186 Art Un	for EV 2005	Filing Date	September 30, 2003			
Applicant daims small entity is talus. See 37 CFR 1.27. Examiner Name Paul W. Schlic Art Unit 2186 Art Unit		First Named Inventor	Randy B. Osborne			
Applicant dalams small entity status. \$60.37 CFR 1.27. AT Unit						
METHOD OF PAYMENT (check all that apply) Check Credit card Money Order None Other (please identify): Check Credit card Money Order None Other (please identify): Deposit Account Deposit Account Number: 02_2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP	Apolicant claims small entity status. Sec 37 CFR 1.27.					
METHOD OF PAYMENT (check all that apply) □ Check □ Credit card □ Money Order □ None □ Other (please identify): □ Check □ Credit card □ Money Order □ None □ Other (please identify): □ Check □ Credit card □ Money Order □ None □ Other (please identify): □ Charge fee(s) indicated below □ Charge foe(s) indicated below □ Charge fee(s) indicated below □ Charge fee(s) indicated below □ Charge any additional fee(s) or underpayment of fee(s) □ Charge fee(s) indicated below, except for the filing fee □ Charge fee(s) indicated below, except fee(s) indicated						
METHOD OF PAYMENT (check of that apply) □Check □Credit card □ Money Order □None □Other (please identify): □Deposit Account Deposit Account Number: 02-2666 □Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) □Charge foe(s) indicated below □Charge foe(s) indicated below □Charge any additional fec(s) or underpayment of fee(s) □Charge any additional fec(s) or underpayment of fee(s) □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below □Charge foe(s) indicated below □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for the filling fee □Charge foe(s) indicated below, except for fee foe □Charge foe(s) indicated below, except foe or oan □C	TOTAL AMOUNT OF PAYMENT (\$) 130.00	Altomey Docket No.	42P16963			
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Check Credit card Money Order None Other (please identify):	NEXUOD OF PAYMENT (check all that apply)					
Deposit Account Deposit Account Number: 92-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Credit any overpayments 10 2f' = 0 x 2000	METHOD OF PATHLETT (SHOWN TO 1)	Jehor (pleace identif	5v)·			
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Manage fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) Under 37 CFR § § 1.16, 1.17, 1.18 and 1.20. Credit any overpayments Credit any	For the above-identified deposit account, the Director is b	aereby authorized to	(check an mat apply)			
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	SUBMITTED B	Registration No.	44-188 Telephone (714) 557-3800			

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Signature

P.2/5

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/676,882		
		Filing Date	September 30, 2003		
		First Named Inventor	Randy B. Osborne		
`		Art Unit	2186		
		Examiner Name	Paul W. Schlic		
Total Number of Pages in This Submission 4		Attorney Docket Number	42P16963		
ENCLO	SURES (chec	k all that apply)			
Fee Transmittal Form	Drawing(s)		After Allowance Communication to TC		
Fee Attached	Liconsing-	related Papers	Appeal Communication to Board of Appeals and Interferences		
Amendment / Response	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After Final Affidavits/declaration(s)	Petition to Provisiona	Convert a Application	Proprietary Information		
Extension of Time Request	Power of A	Attorney, Revocation f Correspondence Address	1		
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Information Disclosure Statement	Request fo	or Refund			
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Certified Copy of Priority Document(s)		scape Table on CD			
Response to MissIng Parts/ Incomplete Application Remarks		1			
Basic Filing Fee					
Declaration/POA Response to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Eric T. King, Reg. No. 44,188					
Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP					
Signature					
Date August 24, 2006					
CERTIFICATE OF MAILING/TRANSMISSION					
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.					
Typed or printed name Susan McFarlane					
	is Ha	rest -	Date August 24, 2006		

Based on PTO/SB/21 (09-04) as mindlocker stakely, Scioknif, Taylor & Zatmen (wir) 11/30/2005. SEND TO. Commissioner for Patenta, P.O. Brix 1450, Alexandria, VA 22313-1450